UNITED STATES FORM D

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549SEC Mail Processing Estimated average burden Section

TEMPORARY FORM D

SEP 29 2008

OMB Number: 3235-0076 September 30, 2008

NOTICE OF SALE OF SECURITIES ington, DC PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Offer and Sale of Series A-2 Preferred Stock Filing Under (Check box(es) that apply):	Name of Offering (check if this is an amendment and name has changed, and indicate change.)								
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer. Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Genea Energy Partners, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) 23691 Via Del Rio, Yorba Linda, California 92887 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Grif different from Executive Offices) Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (Offer and Sale of Series A-2 Preferred Stock								
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23691 Via Del Rio, Yorba Linda, California 92887 Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (Genea Energy Partners, Inc.	,,,							
Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Commercial Property Energy Management Systems Type of Business Organization Corporation Ilimited partnership, already formed business trust Description of Business Organization Ilimited partnership, to be formed	Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Inc.	luding Area Code)							
Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Commercial Property Energy Management Systems Type of Business Organization Corporation Ilimited partnership, already formed business trust Description of Business Organization Ilimited partnership, to be formed									
(if different from Executive Offices) Brief Description of Business Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (23691 Via Del Rio, Yorba Linda, California 92887 (714) 692-9003								
Brief Description of Business Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (08060353 limited partnership, to be formed	Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Inc.	luding Area Code)							
Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (08060353 limited partnership, to be formed other (08060353 other (08060353	(if different from Executive Offices)								
Commercial Property Energy Management Systems Type of Business Organization Corporation limited partnership, already formed other (08060353 limited partnership, to be formed other (08060353 other (08060353									
Type of Business Organization Corporation	Brief Description of Business	**************************************							
Type of Business Organization Corporation	UEXY AND XXY CONTROL UNIT OF THE CONTROL OF THE CON								
corporation limited partnership, already formed other (08060353 limited partnership, to be formed	Commercial Property Energy Management Systems								
business trust limited partnership, to be formed		TREE BUILDS AND LINE							
business trust limited partnership, to be formed	☐ corporation ☐ limited partnership, already formed ☐ other (0806035	3							
Month Year		<u> </u>							
	Month Year								
Actual or Estimated Date of Incorporation or Organization:1106 \(\text{Actual} \) Actual \(\text{\begin{align*} Estimated \) \(\text{\begin{align*} Estimated \) \\ \end{align*}} \)		mated							
Jurisdiction of Incorporation of Organization: (Enter two-letter U.S. Postal Service abbreviation for State:									
CN for Canada; FN for other foreign jurisdiction)	CN for Canada; FN for other foreign jurisdiction)								

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form, Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

	A DACIC IDE	NTIFICATION DATA		
2. Enter the information requested for the		MITFICATION DATA	<u> </u>	
• Each promoter of the issuer, if the	-	within the nact five years:		
•	· · · · · · · · · · · · · · · · · · ·		i 100/	a of a class of aguity acquaition of
 Each beneficial owner having the parties the issuer; 	bower to vote or dispose, o	or direct the vote or disposit	non oi, 10% or moi	e of a class of equity securities of
Each executive officer and director	r of corporate issuers and	of corporate general and ma	maging partners of	partnership issuers; and
 Each general and managing partne 	r of partnership issuers.			
Check Box(es) that Apply: Promoter	□ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			•	
Jowdy, Maureen S.				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
	•			
23691 Via Del Rio, Yorba Linda, Californ				
Check Box(es) that Apply: Promoter	■ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Voysey, Keith				
Business or Residence Address (Number and	l Street, City, State, Zip C	ode)		
22/01 W. Bal Die Washe Linde Caller	!- 0000 0			
23691 Via Del Rio, Yorba Linda, Californ Check Box(es) that Apply: Promoter	Beneficial Owner		□ Director	General and/or
Check Box(es) that Apply. Tronloter	_ Benericial Owner	Executive Officer	⊠ Director	Managing Partner
Full Name (Last name first, if individual)				
Schneider, Doug				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
22/01 Via Dal Dia Washa Linda California	:- 02008			
23691 Via Del Rio, Yorba Linda, Californ Check Box(es) that Apply: Promoter	Beneficial Owner		☐ Director	☐ General and/or
Check Box(cs) that Apply. Tromoter	_ Beneficial Owner	EX Executive Officer	_ Director	Managing Partner
Full Name (Last name first, if individual)				
Wall, Douglas F.				
Business or Residence Address (Number and	l Street, City, State, Zip C	ode)		
23691 Via Del Rio, Yorba Linda, Californ				
Check Box(es) that Apply: Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Windy City Equity				
Business or Residence Address (Number and	l Street, City, State, Zip C	ode)		
952 W. Lake Street, Chicago, IL 60607			E n'	
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Jaschke, Justin L.				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
5616 S. Ivy Ct., Greenwood Village, CO 8	0111			
		additional copies of this sho	eet, as necessary)	

2 of 9

2. Franch information and for the		NTIFICATION DATA	<u> </u>	
2. Enter the information requested for the	-			
Each promoter of the issuer, if the	-			
• Each beneficial owner having the the issuer;	power to vote or dispose, o	or direct the vote or disposi	tion of, 10% or mo	re of a class of equity securities of
Each executive officer and director	or of corporate issuers and	of corporate general and ma	anaging partners of	partnership issuers; and
 Each general and managing partners 	er of partnership issuers.			
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				······································
Britannia Real Estate, LLC	1 Ca Cit. Ca-a- 7:- C	- 1-\		<u> </u>
Business or Residence Address (Number an	a Street, City, State, Zip C	.oae)		
P.O. Box 507050, San Diego, CA 92150				
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				<u>-</u>
Business or Residence Address (Number an	d Street, City, State, Zip C	Code)		· · · ·
.	, , , , , , , , ,	,		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or
Check Box(es) that Apply. Promoter	_ belieficial Owller	☑ Executive Officer	☐ Director	Managing Partner
Full Name (Last name first, if individual)				,
Business or Residence Address (Number an	d Street, City, State, Zip C	Code)		
,	• • •	•		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number an	d Street, City, State, Zip C	Code)		
,	, ,, , ,	,		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
				Managing Farther
Full Name (Last name first, if individual)				
Business or Residence Address (Number an	d Street, City, State, Zip C	code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
, , <u> </u>	_	-	_	Managing Partner
Full Name (Last name first, if individual)			·····	
i an ivane (Last hame first, it individual)				
Business or Residence Address (Number an	d Street, City, State, Zip C	Code)		
(Use bl	ank sheet, or copy and use	additional copies of this sh	eet, as necessary)	
	1	i of 0		

					B. INFO	RMATI	ON ABO	UT OFF	ERING					
1. 1	las the issu	er sold, or	does the is	suer intend	to sell, to r	on-accred	ited invest	ors in this	offering?.				Yes	No
				Ans	wer also in	Appendix	, Column 2	2, if filing	under UL	OE.				
2. \	What is the	minimum	investment	that will be	accepted i	rom any ir	ndividual?.	••••••	•••••		•••••	••••••	discre	tion .
3. I	Does the off	arina narn	ait ioint ou	marchin of	s cinala uni	+ 9							Yes ⊠	No □
	Enter the in		•	•	_									
s t l	ion or simil to be listed it ist the name or dealer, yo	ar remune s an assoc e of the bro	ration for s iated perso oker or dea	olicitation on or agent of ler. If more	of purchase of a broker of than five (rs in conne or dealer re 5) persons	ection with egistered w to be liste	sales of so	ecurities i C and/or	n the offer with a state	ing. If a period	oerson		
	Vame (Last													
Busin	ess or Resid	dence Add	ress (Num	ber and Stre	et, City, St	ate, Zip Co	ode)					•		
Name	of Associa	ted Broke	r or Dealer							····				
States	in which P	erson List	ed Has Sol	icited or In	tends to Sol	icit Purcha	isers							
•	k "All State	es" or che										_	All States	
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT] 	[VT] 	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full !	Name (Last	name first	, if individ	ıal)										
														
Busir	ess or Resid	dence Add	lress (Num	ber and Stre	et, City, St	ate, Zip Co	ode)							
Name	of Associa	ted Broke	r or Dealer										· ·	
States	s in which P	erson List	ed Has Sol	icited or In	tends to Sol	icit Purcha	asers							
(Chec	k "All State	es" or che	ek indiviđu	al States								🗆 🗸	All States	
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[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full l	Vame (Last	name first	, if individ	ual)				-			····		•• •	
Busir	ess or Resi	dence Add	lress (Num	ber and Stre	et, City, St	ate, Zip Co	ode)							
Name	of Associa	ted Broke	r or Dealer											
States	s in which F	erson List	ed Has Sol	icited or In	tends to Sol	icit Purcha	asers							
	k "All State									• • • • • • • • • • • • • • • • • • • •		🗆 /	All States	
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary) 4 of 9

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for		
	exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	s
	Equity	\$ 650,000.40	\$ 650,000.40
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	S
	Partnership Interests	s	
	Other (Specify)	\$	\$
	Total	\$_650,000.40	\$_650,000.40
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Aggregate Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ <u>650,000.40</u>
	Non-accredited Investors	0	\$_0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the user, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	T	Delles Assessed
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		s
	Regulation A		s
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ <u>25,000</u>
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (Identify)		\$
	Total	\boxtimes	\$ <u>25,000</u>

b. Enter the difference between the agand total expenses furnished in respons	ggregate offering price given in response to Part C - se to Part C - Question 4.a. This difference is the "a	- Question djusted gro	1 ess		6625.000.40
 Indicate below the amount of the adjustion for each of the purposes shown. If the and check the box to the left of the control o	sted gross proceed to the issuer used or proposed to e amount for any purpose is not known, furnish an estimate. The total of the payments listed must of the forth in response to Part C - Question 4.b. above.	be used estimate	Payments to	•	
			Officers Directors, & Affiliates		Payments to Others
Salaries and fees			\$		\$
Purchase of real estate	,,,,,,	🗆	s		\$
Purchase, rental or leasing and installati	ion of machinery and equipment		s		\$
Construction or leasing of plant building	gs and facilities	🛚	S		\$
offering that may be used in exchange f	ing the value of securities involved in this or the assets or securities of another	г	¢	П	\$
					\$ \$
		_			
Working capital		🗆	\$	\boxtimes	\$ <u>625,000.40</u>
Other (specify):			\$		\$
Column Totals		🗆	\$	\boxtimes	\$ <u>625,000.40</u>
Total Payments Listed (column totals a	dded)		⊠ \$ <u>_6</u>	<u> 25,000</u>	.40
	D. FEDERAL SIGNATURE				
signature constitutes an undertaking by the is	signed by the undersigned duly authorized person. Is ssuer to furnish to the U.S. Securities and Exchange on-accredited investor pursuant to paragraph (b)(2) of the content of the conten	Commissi	on, upon written		
Issuer (Print or Type)	Signature		Date		
Canao Energy Portners Inc			Senten	nber 23	3. 2008
Genea Energy Partners, Inc. Name of Signer (Print or Type)	Title of Signer (Print or Type)	-	Septen		,, 2000
Douglas F. Wall	Chief Financial Officer				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNAT	TURE	
Is any party described in 17 C of such-rule?	Yes No □ ⊠		
	See Appendix, Column 5 for s	tate response.	
2. The undersigned issuer hereby (17 CFR 239.500) at such time	undertakes to furnish to any state administrator es as required by state law.	of any state in which this notice is	filed a notice on Form D
 The undersigned issuer hereby offerees. 	undertakes to furnish to the state administrators	upon written request, information	furnished by the issuer to
Offering Exemption (ULOE)	ents that the issuer is familiar with the conditions of the state in which this notice is filed and under stablishing that these conditions have been satisf	stands that the issuer claiming the	
The issuer has read this notification duly authorized person.	and knows the contents to be true and has duly	caused this notice to be signed on i	its behalf by the undersigned
Issuer (Print or Type)	Signature	Date	
Genea Energy Partners, Inc.		September 23,	2008
Name (Print or Type)	Title (Print or Type)	•	
Douglas F. Wall	Chief Financial Officer		

Instruction:

Douglas F. Wall

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPEN	TDIX				
1	2		3		4			5	·]
	Intend To n accrec investo Sta (Part B-	on- lited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL			· · · <u>_ · · · · · · · · · · · · · · · ·</u>		 			ļ	
AK									
AZ									
AR		x	Series A-2 Preferred	1	CCEO 000 40	0	0	<u> </u>	X
CA		^	Stock (\$650,000.40)	1	\$650,000.40	, v	0		А
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	APPENDIX									
1	2		3		4			5		
٠	Intend to no accrec investo Sta (Part B-	on- lited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and Amount purchased in State (Part C-Item 2)				ification ite ULOE attach ation of granted) Item 1)	
State	Yes	No		Number of Accredited Investors	Accredited Accredited				No	
MT										
NE										
NV										
NH			· · · · · · · · · · · · · · · · · · ·							
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